## Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

| Establishment Name RALLY'S (STATE ST)  Address 2350 STATE ST, NEW ALBANY IN 47150  Owner FALCONS GROUP  Owner's Address   |   |             |   |  |   |                          | Telephone Number 812-590-3181  Purpose X Routine Follow-up | Date of<br>Inspection<br>04/25/2022<br>Follow Up | ID#  Released 05/05/2022 |
|---|---|-------------|---|--|---|--------------------------|--|--|--------------------------|
| Person in Charge BRIAN BRATCHER  Responsible Person's Email  Certified Food Handler   |   |             |   |  |   |                          | Complaint Pre-Operational Temporary HACCP Other (list)     | Menu Type 1 2 3 <u>X</u> 4 5                     |                          |
| CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R" |   |             |   |  |   |                          |  |  |                          |
| 295<br>310<br>431<br>218  | C | X<br>X<br>X | R | Observed dust be<br>Observed droppe<br>Observed cleaning | sed to store slicer in nee<br>uild-up around on air ve<br>ed items behind register<br>ng needed behind ice cr<br>of ice in floor in walk-in | ents.<br>at Nor<br>eam m | rth drive thru window. achine by South door.               | 2 days<br>3 days<br>2 days<br>2 Days             | orrected                 |
| Summary of Vio  |   | (itle prin  |   | 0 NC _   | 4 R 0   |                          | nspected by (name and title                                | printed):  |                          |
| Received by (signature):  |   |             |   |  |   |                          | Thomas Snider CFS  Inspected by (signature):               |  |                          |
| cc:   |   |             |   |  | cc:   |                          |  | cc:  |                          |